

ASAP!

Work Order ID 101004

101004

Page 1

April-30-13 2:38:06 PM

Item ID: 646.3711

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Clip

Start Date: 4/30/13

Start Qty: 500

5

Cust Item ID:

Required Date: 5/10/13

Req'd Qty: 500

5

Customer:

Reference:

Approvals:

Process Plan: MLS

Date: 13-05-02

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
646.3700	A

110	0.00
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110

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg

Dwg Rev: A

Prog Rev: A

2-Deburr if necessary

120

QC2- Inspect parts off machine FAI/FAIB

0.00

120

QC

Memo

0.00

Quality Control

10 0 JM13-6-6

10 0 JM13-6-6

Grain Direction

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabelled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 101004

101004

Page 2

April-30-13 2:38:06 PM

Item ID: 646.3711

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Clip

Start Date: 4/30/13 Start Qty: 5.00 *5*

Cust Item ID:

Required Date: 5/10/13 Req'd Qty: 5.00 *5*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* QC Quality Control	QC8- Inspect parts - second check Memo	0.00 DAS 27 8-6 13.6-6				10			
140 *140* Brake NC Brake NC	Form as per dwg Memo	0.00 0.00				10			SP 13.6-6
150 *150* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00 LW 27 13.6-6				10			

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabelled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 101004

101004

Page 3

April-30-13 2:38:06 PM

Item ID: 646.3711

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Clip

Start Date: 4/30/13

Start Qty: 5.00 *5*

Cust Item ID:

Required Date: 5/10/13

Req'd Qty: 5.00 *5*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

Outsource process-Anodize per QSI017 4.1.10.1

0.00

160

Outsource4

Memo

0.00

Outsource process - Anodize

HARD ANODIZE, COLOR BLACK AS PER DWG.(SEE NOTE 2)

2/0.20116

CL 13/06/07

(10)

170

Receive & Inspect for Damage & Mat'l Certs

0.00

170

Packaging

Memo

0.00

Packaging

4/3/1/9 (10)

180

QC5- Inspect part completeness to step on W/O

0.00

180

QC

Memo

0.00

Quality Control

N/A

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
---	---	---

☐ Ovalized
☐ Over/Under tolerance
☐ Part Incorrect
☐ Part Lost/Missing
☐ Part Moved
☐ Positioned Wrong
☐ Power Loss/Surge

☐ Pressure/Forced
☐ Temperature/Cure
☐ Weld
☐ Wrong Stock Pulled
☐ Other

Work Order ID 101004

101004

Page 4

April-30-13 2:38:06 PM

Item ID: 646.3711

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Clip

Start Date: 4/30/13

Start Qty: 5.00

5

Cust Item ID:

Required Date: 5/10/13

Req'd Qty: 5.00

5

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
190		0.00							
190									
SprayPaint		0.00							
Spray Painting									
	Memo	0.00							
	PRIME IAW MIL-P-23377J TYPE1 CLASS N AS PER DWG. (SEE NOTE 2)								
	BATCH: 125452								
200		0.00							
200									
QC		0.00							
Quality Control									
	QC14- Inspect Spray Paint	0.00							
	Memo	0.00							
210		0.00							
210									
Packaging		0.00							
Packaging									
	Identify as per dwg & Stock Location: 8535	0.00							
	Memo	0.00							
	IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV								

CZ 13/06/20



13 6 21

10
10x

SP
13-6-20

10x

SP
13-6-20

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 101004***101004***

Page 5

April-30-13 2:38:06 PM

Item ID: 646.3711

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Clip

Start Date: 4/30/13

Start Qty: 5.00

5

Cust Item ID:

Required Date: 5/10/13

Req'd Qty: 5.00

5

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

220

QC21- Final Inspection - Work Order Release

0.00

220

QC

Memo

0.00

Quality Control

MCS 13-06-21

13-06-20

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabelled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

April-30-13 2:38:06 PM

Page 1

Work Order ID: 101004

Parent Item: 646.3711

Start Date: 4/30/13

Required Date: 5/10/13

Parent Item Name: Clip

Start Qty: 5.00

Required Qty: 5.00

Comments: IPP REV:A 12.11.23 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M6061T6S.063 6061-T6 .063 Sheet		Purchased	No			110	sf	503.1125	0.036	0.1894 735 0.25			Jm 3.6.6
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				MAT021		503.1125							
				123135		120.5625							
				124003		86			124003				
				125431		296.55							

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
--	---	---

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

APICAL
INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO. 03702

SHEET 1 OF

DWG NO. 646.3700

REV: A

PREPARED
BY B. PETERS

DATE: 11/15/12

EFFECT L
☐ INC. ☒

DWG TITLE: SHEETMETAL

APPROVED BY:

ENGR.

MFG

QC

EFF:

NEXT ORDER

TRANSACTION CODES (TC)
A-ADD C-CREATE
R-REVISE D-DELETE

REASON: ADDED ALTERNATE MATERIAL AND REVISED
REFERENCE DIMENSIONS

EOR:

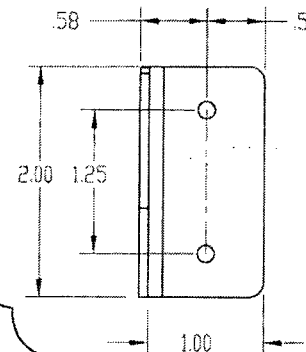
D-12-010

SHEET 1, ZONE A2 IS:

IS

△ PRIMARY MATERIAL: ALUMINUM 6061-T6 PER AMS-QQ-A-250/11
ALTERNATE MATERIAL: SS 17-4 PH PER AMS 5604

IS

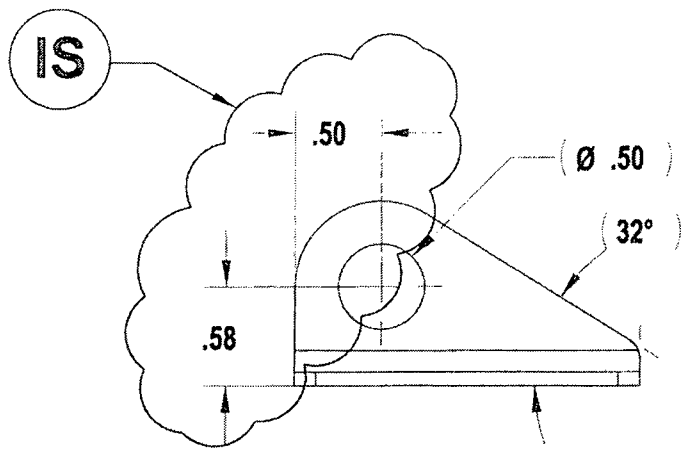


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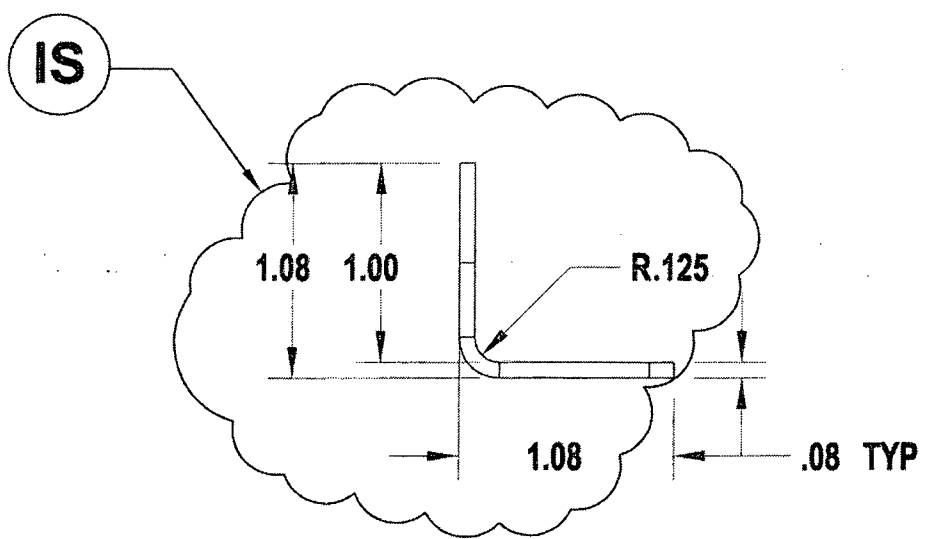
101004.MCJ
13-05-02

F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL	SPECIFICATION
DOCUMENTS EFFECTED:				<input type="checkbox"/> RFMS <input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> ICA <input type="checkbox"/> BOM	CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

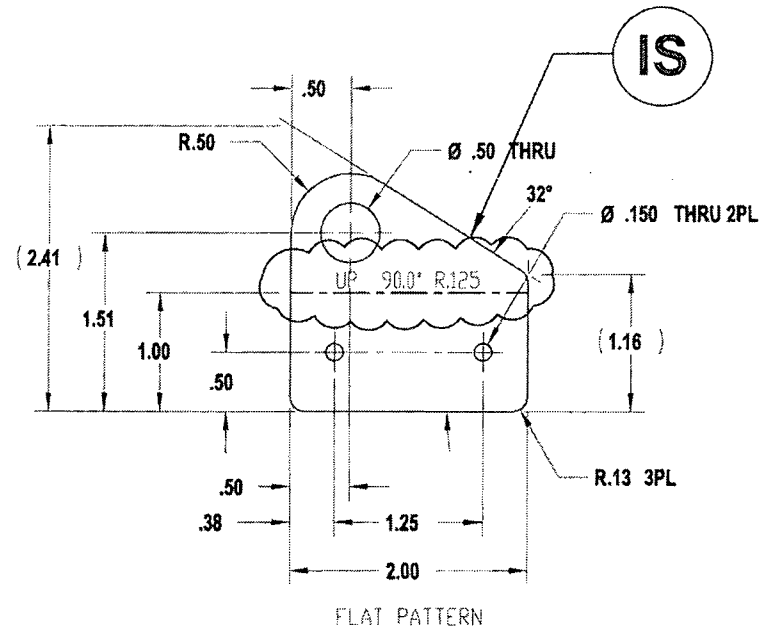
101004



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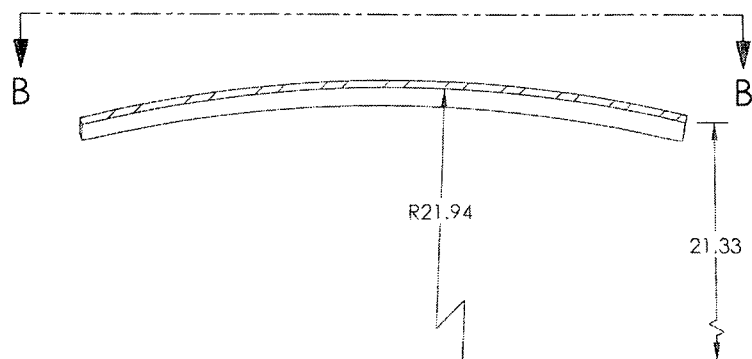
SHEET 7, ZONE D1 IS:



SHEET 7, ZONE B7 IS:

F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
-----	----	-------------	-----	-------------	------------------------

101004



SECTION A-A



R395.138

R.13 4PL

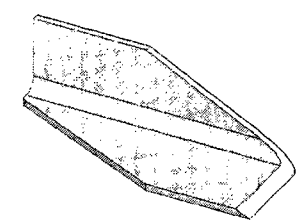
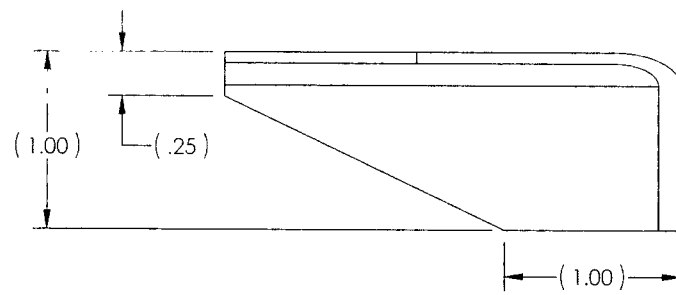
13.51

10.49
10.54

SECTION B-B

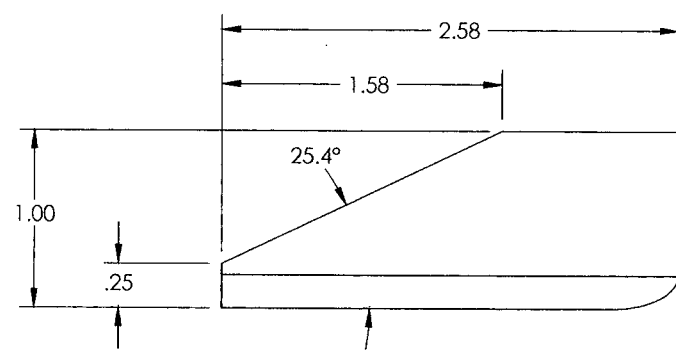
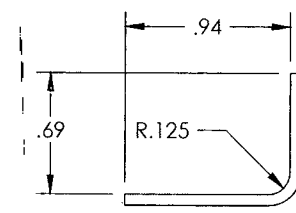
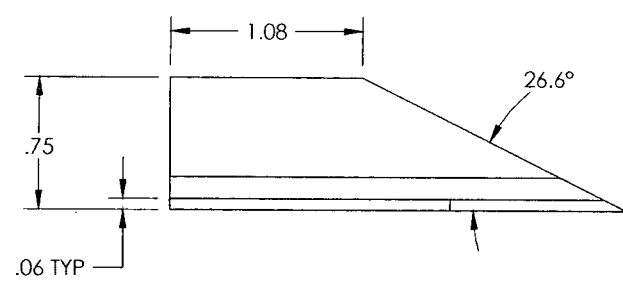
ORIGINAL DATE 10/06/10		APICAL INDUSTRIES 2408 TEMPLE HEIGHTS DR. OCEANSIDE, CA 92056-3512 (760)724-5300	
DRAWN BY J. JOSEPH		SHEETMETAL	
CHECKED BY J. JOSEPH		DATE 07/11/16	646.3700
PROJECT GENERAL		SCALE NONE	SHEET 2 OF 9

101004

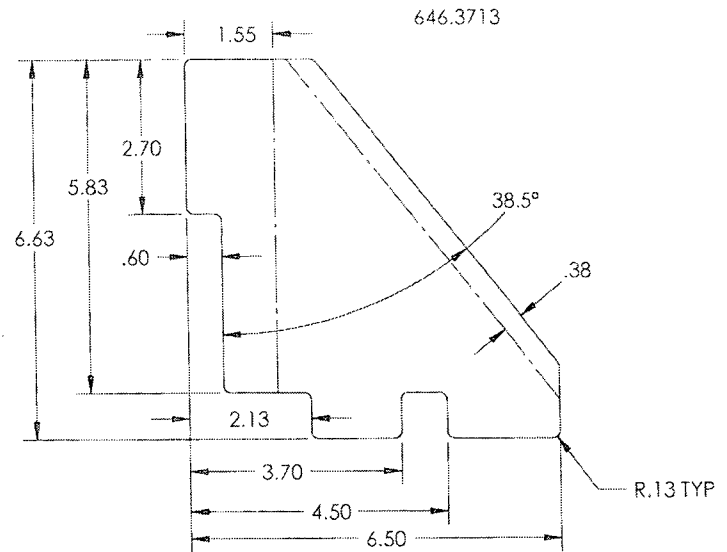
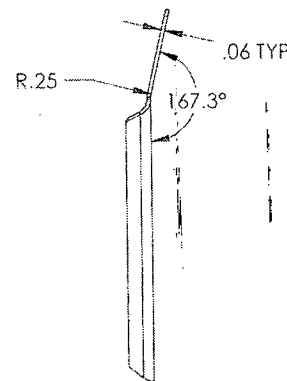
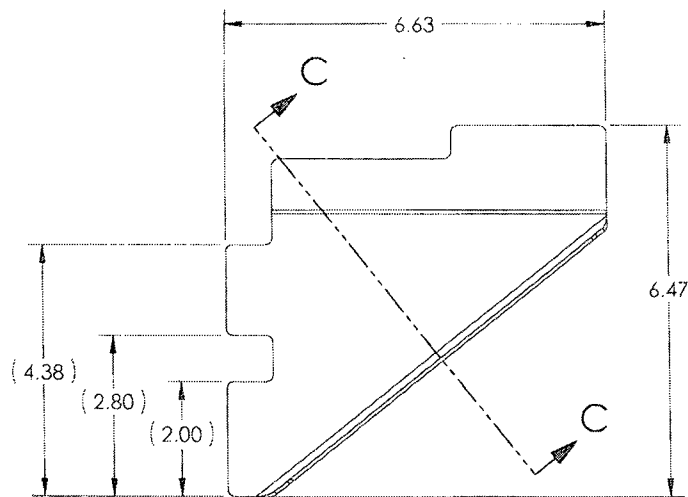
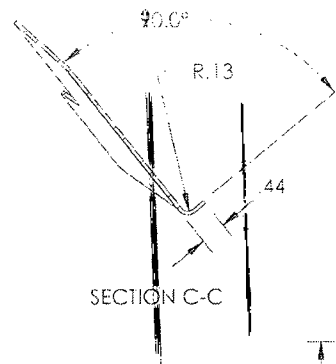


Gr Direction

646.3711 SHOWN
646.3712 OPPOSITE

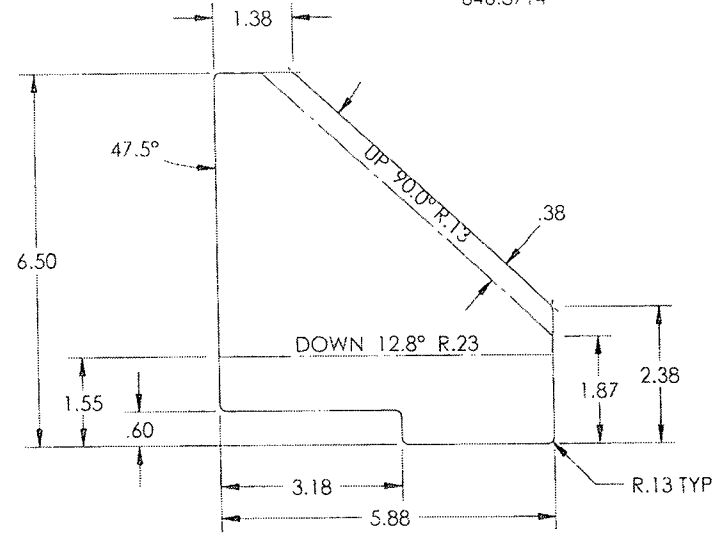
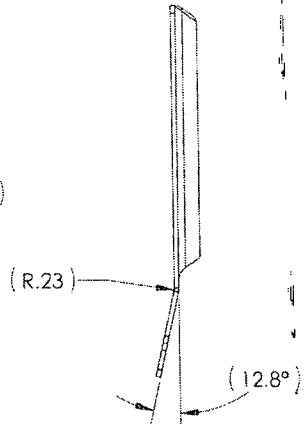
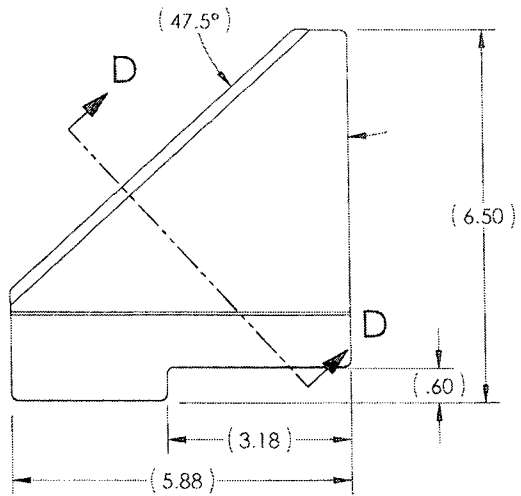
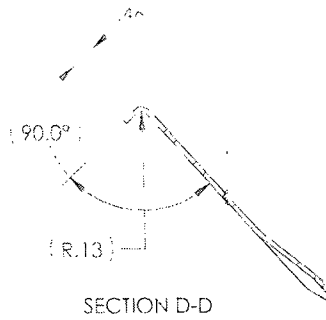
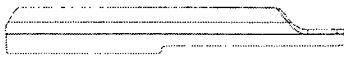


NEXT ASSY (S)	ORIGINAL DATE 09-18-08	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300			
	DRAWN BY BRAVO				CHECKER JOSEPH
	DRAWING APPROVAL S. JOSEPH				
	CONTRACT NO.				
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 2 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.005 ANGLES ±.3°					
6	7	8	9	10	
SCALE: NONE		646.3700		REV. A	
SHEET 3 OF 9					



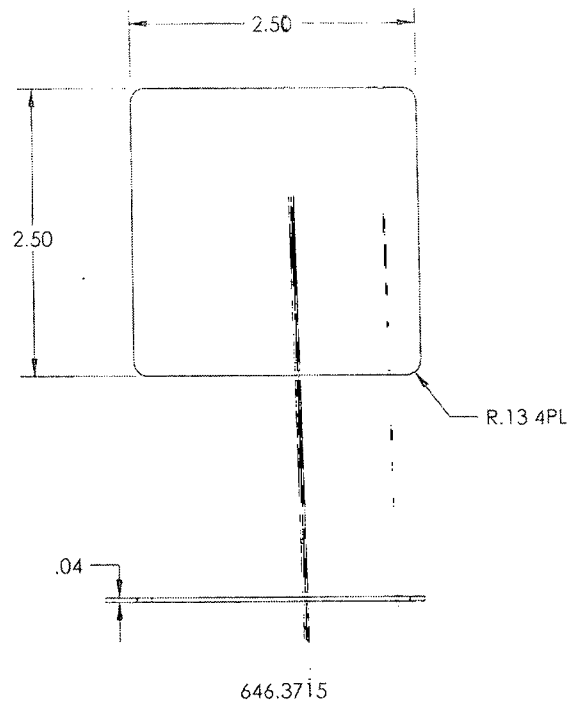
FLAT PATTERN

NEXT ASSY IS:	DESIGNED BY	DATE	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
	DRAWN BY	DATE		
	CHECKED BY	DATE		
	APPROVED BY	DATE		
SPECIAL INSTRUCTIONS:			SHEETMETAL	
DIMENSIONS ARE IN INCHES			SHEET NO.	646.3700
DIMENSIONS ARE IN INCHES			SCALE	1/2" = 1"
DIMENSIONS ARE IN INCHES			SHEET	1 OF 1



FLAT PATTERN

APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR OCEANSIDE, CA 92058-3612 (760) 724-5300	
SHEETMETAL	
DATE: 07/03/00 BY: 07/03/00 SCALE: 1:1	646.3700 SHEET 5 OF 9



NEXT ASSY (S)	ORIGINAL DATE CROSS REF	OLD CODE	APICAL INDUSTRIES 2608 FEMPLE HEIGHTS DR OCAHONDA, CA. 92056-3512 (760) 774-5301
P. REVISED	P. APPROVED	P. JOINTLY	
P. APPROVED	P. APPROVED	P. APPROVED	SHEETMETAL 646.3700
P. APPROVED	P. APPROVED	P. APPROVED	
P. APPROVED	P. APPROVED	P. APPROVED	FOR CAD COLOR DWS INT SCALE: NONE
P. APPROVED	P. APPROVED	P. APPROVED	DWG INT 646.3700 SHEET C A

Technical drawing of a rectangular plate with dimensions and a central slot. The drawing includes the following dimensions and features:

- Overall width: 1.50
- Overall height: 2.00
- Slot width: 0.58
- Slot height: 1.25
- Distance from bottom edge to slot center: 1.00
- Two circular holes are located on the right side of the plate, centered vertically relative to the slot.

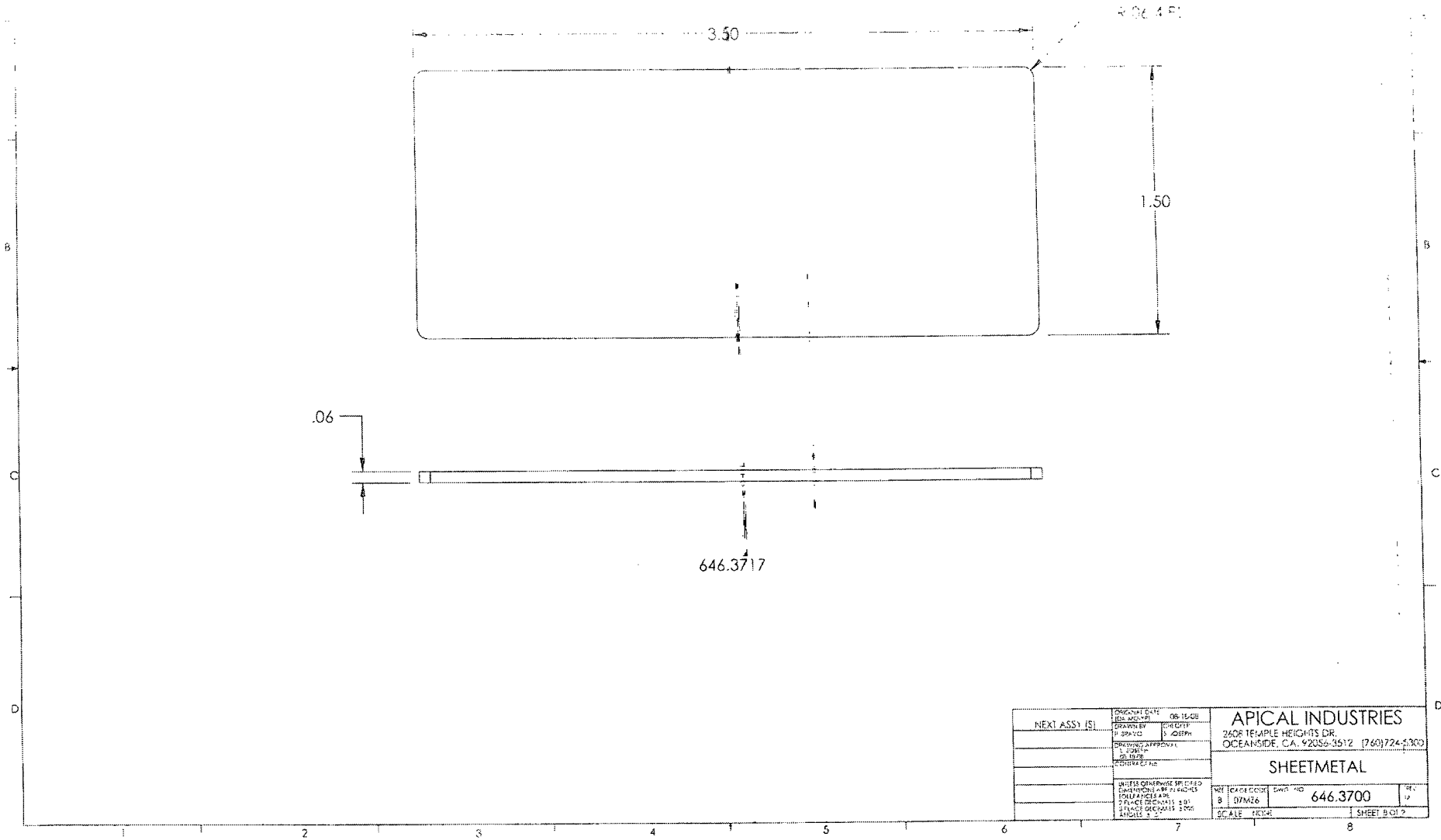
Technical drawing of a corner detail. The drawing shows a corner with a fillet radius of R.13. Dimensions are indicated as follows:

- Vertical dimensions: (1.08) and (1.00)
- Horizontal dimension: (1.08)
- Fillet radius: (R.13)
- Small dimension: .08 TYP

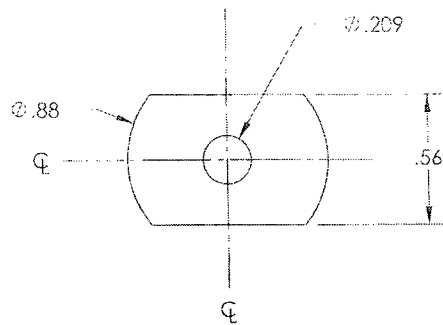
Technical drawing of a flat pattern for a mechanical part. The drawing shows a rectangular base with a semi-circular top on the left side. Key dimensions include: a total width of 2.00, a total height of 2.41, a top-left radius of R.50, a central horizontal slot with a width of 1.25 and a height of 1.00, and a bottom-left corner radius of R.13. A 32-degree angle is indicated on the right side. Material specifications include "UP 90.0° R.13" and "R.13 3PL". Hole dimensions are given as "Ø.50 THRU" and "Ø.150 THRU 2PL". Other dimensions include 1.51, 1.00, .50, .38, and 1.16.

NEXT ASSEY (S) 1. ANALYST: JH 2. DATE: 06-10-83 3. METHOD: F 4. INSTR: 1050N 5. SAMPLE: 1050N 6. ANALYST: JH 7. DATE: 06-10-83 8. METHOD: F 9. INSTR: 1050N 10. SAMPLE: 1050N 11. ANALYST: JH 12. DATE: 06-10-83 13. METHOD: F 14. INSTR: 1050N 15. SAMPLE: 1050N 16. ANALYST: JH 17. DATE: 06-10-83 18. METHOD: F 19. INSTR: 1050N 20. SAMPLE: 1050N 21. ANALYST: JH 22. DATE: 06-10-83 23. METHOD: F 24. INSTR: 1050N 25. SAMPLE: 1050N 26. ANALYST: JH 27. DATE: 06-10-83 28. METHOD: F 29. INSTR: 1050N 30. SAMPLE: 1050N 31. ANALYST: JH 32. DATE: 06-10-83 33. METHOD: F 34. INSTR: 1050N 35. SAMPLE: 1050N 36. ANALYST: JH 37. DATE: 06-10-83 38. METHOD: F 39. INSTR: 1050N 40. SAMPLE: 1050N 41. ANALYST: JH 42. DATE: 06-10-83 43. METHOD: F 44. INSTR: 1050N 45. SAMPLE: 1050N 46. ANALYST: JH 47. DATE: 06-10-83 48. METHOD: F 49. INSTR: 1050N 50. SAMPLE: 1050N 51. ANALYST: JH 52. DATE: 06-10-83 53. METHOD: F 54. INSTR: 1050N 55. SAMPLE: 1050N 56. ANALYST: JH 57. DATE: 06-10-83 58. METHOD: F 59. INSTR: 1050N 60. SAMPLE: 1050N 61. ANALYST: JH 62. DATE: 06-10-83 63. METHOD: F 64. INSTR: 1050N 65. SAMPLE: 1050N 66. ANALYST: JH 67. DATE: 06-10-83 68. METHOD: F 69. INSTR: 1050N 70. SAMPLE: 1050N 71. ANALYST: JH 72. DATE: 06-10-83 73. METHOD: F 74. INSTR: 1050N 75. SAMPLE: 1050N 76. ANALYST: JH 77. DATE: 06-10-83 78. METHOD: F 79. INSTR: 1050N 80. SAMPLE: 1050N 81. ANALYST: JH 82. DATE: 06-10-83 83. METHOD: F 84. INSTR: 1050N 85. SAMPLE: 1050N 86. ANALYST: JH 87. DATE: 06-10-83 88. METHOD: F 89. INSTR: 1050N 90. SAMPLE: 1050N 91. ANALYST: JH 92. DATE: 06-10-83 93. METHOD: F 94. INSTR: 1050N 95. SAMPLE: 1050N 96. ANALYST: JH 97. DATE: 06-10-83 98. METHOD: F 99. INSTR: 1050N 100. SAMPLE: 1050N 101. ANALYST: JH 102. DATE: 06-10-83 103. METHOD: F 104. INSTR: 1050N 105. SAMPLE: 1050N 106. ANALYST: JH 107. DATE: 06-10-83 108. METHOD: F 109. INSTR: 1050N 110. SAMPLE: 1050N 111. ANALYST: JH 112. DATE: 06-10-83 113. METHOD: F 114. INSTR: 1050N 115. SAMPLE: 1050N 116. ANALYST: JH 117. DATE: 06-10-83 118. METHOD: F 119. INSTR: 1050N 120. SAMPLE: 1050N 121. ANALYST: JH 122. DATE: 06-10-83 123. METHOD: F 124. INSTR: 1050N 125. SAMPLE: 1050N 126. ANALYST: JH 127. DATE: 06-10-83 128. METHOD: F 129. INSTR: 1050N 130. SAMPLE: 1050N 131. ANALYST: JH 132. DATE: 06-10-83 133. METHOD: F 134. INSTR: 1050N 135. SAMPLE: 1050N 136. ANALYST: JH 137. DATE: 06-10-83 138. METHOD: F 139. INSTR: 1050N 140. SAMPLE: 1050N 141. ANALYST: JH 142. DATE: 06-10-83 143. METHOD: F 144. INSTR: 1050N 145. SAMPLE: 1050N 146. ANALYST: JH 147. DATE: 06-10-83 148. METHOD: F 149. INSTR: 1050N 150. SAMPLE: 1050N 151. ANALYST: JH 152. DATE: 06-10-83 153. METHOD: F 154. INSTR: 1050N 155. SAMPLE: 1050N 156. ANALYST: JH 157. DATE: 06-10-83 158. METHOD: F 159. INSTR: 1050N 160. SAMPLE: 1050N 161. ANALYST: JH 162. DATE: 06-10-83 163. METHOD: F 164. INSTR: 1050N 165. SAMPLE: 1050N 166. ANALYST: JH 167. DATE: 06-10-83 168. METHOD: F 169. INSTR: 1050N 170. SAMPLE: 1050N 171. ANALYST: JH 172. DATE: 06-10-83 173. METHOD: F 174. INSTR: 1050N 175. SAMPLE: 1050N 176. ANALYST: JH 177. DATE: 06-10-83 178. METHOD: F 179. INSTR: 1050N 180. SAMPLE: 1050N 181. ANALYST: JH 182. DATE: 06-10-83 183. METHOD: F 184. INSTR: 1050N 185. SAMPLE: 1050N 186. ANALYST: JH 187. DATE: 06-10-83 188. METHOD: F 189. INSTR: 1050N 190. SAMPLE: 1050N 191. ANALYST: JH 192. DATE: 06-10-83 193. METHOD: F 194. INSTR: 1050N 195. SAMPLE: 1050N 196. ANALYST: JH 197. DATE: 06-10-83 198. METHOD: F 199. INSTR: 1050N 200. SAMPLE: 1050N 201. ANALYST: JH 202. DATE: 06-10-83 203. METHOD: F 204. INSTR: 1050N 205. SAMPLE: 1050N 206. ANALYST: JH 207. DATE: 06-10-83 208. METHOD: F 209. INSTR: 1050N 210. SAMPLE: 1050N 211. ANALYST: JH 212. DATE: 06-10-83 213. METHOD: F 214. INSTR: 1050N 215. SAMPLE: 1050N 216. ANALYST: JH 217. DATE: 06-10-83 218. METHOD: F 219. INSTR: 1050N 220. SAMPLE: 1050N 221. ANALYST: JH 222. DATE: 06-10-83 223. METHOD: F 224. INSTR: 1050N 225. SAMPLE: 1050N 226. ANALYST: JH 227. DATE: 06-10-83 228. METHOD: F 229. INSTR: 1050N 230. SAMPLE: 1050N 231. ANALYST: JH 232. DATE: 06-10-83 233. METHOD: F 234. INSTR: 1050N 235. SAMPLE: 1050N 236. ANALYST: JH 237. DATE: 06-10-83 238. METHOD: F 239. INSTR: 1050N 240. SAMPLE: 1050N 241. ANALYST: JH 242. DATE: 06-10-83 243. METHOD: F 244. INSTR: 1050N 245. SAMPLE: 1050N 246. ANALYST: JH 247. DATE: 06-10-83 248. METHOD: F 249. INSTR: 1050N 250. SAMPLE: 1050N 251. ANALYST: JH 252. DATE: 06-10-83 253. METHOD: F 254. INSTR: 1050N 255. SAMPLE: 1050N 256. ANALYST: JH 257. DATE: 06-10-83 258. METHOD: F 259. INSTR: 1050N 260. SAMPLE: 1050N 261. ANALYST: JH 262. DATE

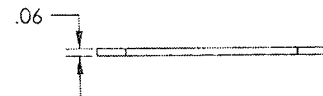
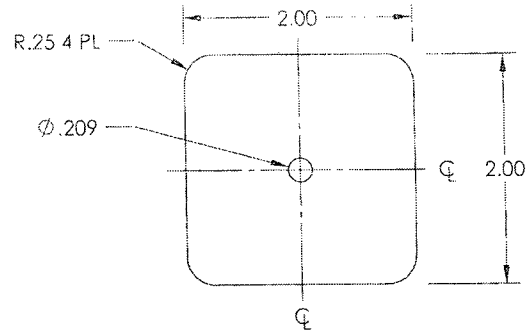
101004



101004/



646.3718



646.3719

NEXT ASSY (S)	DATE: 01-01-00	CS: 10-00	APICAL INDUSTRIES	
	DRAWN BY: J. HICKER	DATE: 01-01-00		
	P. BRAND	DATE: 01-01-00	2608 TEMPLE HEIGHTS DR.	
	DATE: 01-01-00	DATE: 01-01-00	OCEANSIDE, CA 92056-3512 (760) 724-5300	
QUANTITIES AND SPECIFICATIONS			SHEETMETAL	
DIMENSIONS AND FINISH			QTY: 6	REF: A
SHEETMETAL: 101			646.3700	
SHEETMETAL: 101			SCALE: 1:1	SHEET 1 OF 1



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62447

Date: 17-Jun-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To


DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST 30 PCS 646.3711 22 PCS 646.3713 30 PCS 646.3716 10 PCS 646.3712 HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 PRIME MIL-P-23377J TYPE I CLASS N Job: 20130365 Rev: Line:		
Certificate of Conformance			
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.			
ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY			
DATE: 17/6/13			
CERTIFIED SIGNATURE: 			
RECEIVER SIGNATURE: _____			